



08/27/97

Attorney Docket No.:

A-345-A

DIVISION-CONTINUATION APPLICATION TRANSMITTAL FORM

Anticipated Classification Of This Application:
Class SubclassPrior Application:
Examiner

Art Unit

To the Assistant Commissioner for Patents:

This is a request for filing a ☒ continuation ☐ divisional application, under 37 CFR 1.60, of pending prior application Serial No. 08/474,883 filed on June 7, 1995, of **MARY ANN PELLEYMOUNTER, RANDY IRA HECHT and MICHAEL BENJAMIN MANN** for **OB PROTEIN COMPOSITIONS AND METHODS**

1. ☒ Enclosed is a copy of the prior application, including the oath or declaration as originally filed. I hereby verify that the attached papers are a true copy of prior application Serial No. 08/474,833 as originally filed on **June 7, 1995**, and further that this Statement was made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.
2. ☒ The filing fee is calculated below:

For	Number Filed		Number Extra		Rate	Fee
Total Claims	12	- 20 =	0	x	\$22.00 =	\$ 0.00
Independent Claims	4	- 3 =	1	x	\$80.00 =	80.00
Multiple Dependent Claims	0			+	\$260.00 =	0.00
Basic Fee					\$770.00 =	770.00
Total Filing Fee						\$ 850.00

3. ☒ The Commissioner is hereby authorized to charge any filing fees which may be required by the accompanying application, any additional fees which may be required during pendency of this application, or credit any over-payment to Deposit Account No. 01-0519 in the name of Amgen Inc. An original and one copy are enclosed.
4. ☐ A check in the amount of \$ _____ is enclosed.
5. ☐ Cancel in this application original claims _____ of the prior application before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)
6. ☒ Amend the specification by inserting before the first line the sentence: This application is a ☒ continuation, ☐ division, of application Serial No. 08/474,833, filed June 7, 1995 which is hereby incorporated by reference

EXPRESS MAIL CERTIFICATE

"Express Mail" mail labeling number: TB813684179

Date of Deposit: 8/27/97

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. 1.10 on the date indicated above and is addressed to Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231.

Printed Name

Signature

FEE AUTHORIZATION / EXTENSION OF TIME				PATENT APPLICATION		
Serial No. 08/474,833		Filing Date June 7, 1995	Examiner Draper, G.	Attorney's Docket No: A-345		
In Re Application of Pelleymounter et al.						
For OB PROTEIN COMPOSITIONS AND METHODS						
TO THE ASSISTANT COMMISSIONER FOR PATENTS:						
<input checked="" type="checkbox"/> Applicant(s) petition(s) for the following extension of time under 37 C.F.R. 1.136(a):						
<input type="checkbox"/> One month of original due date (\$110.00)						
<input type="checkbox"/> Two months of original due date (\$390.00)						
<input checked="" type="checkbox"/> Three months of original due date (\$930.00)						
<input type="checkbox"/> Four months of original due date (\$1,470.00)						
<input checked="" type="checkbox"/> A response in connection with the matter for which this extension is requested:						
<input type="checkbox"/> is filed herewith.						
<input type="checkbox"/> has been filed.						
<input checked="" type="checkbox"/> The response is the filing of a continuation application having an express abandonment conditioned on the granting of a filing date to the continuing application.						
<input type="checkbox"/> The accompanying papers include amended claims for which no additional fee is required.						
<input type="checkbox"/> The accompanying papers include amended claims the fee for which has been calculated as follows:						
CLAIMS AS AMENDED						
(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) No. of extra claims present	(6) Rate	(7) Additional Fee
Total Claims		Minus	=		x \$22	=
Indep. Claims		Minus	=		x \$80	=
Total Additional Fee for this Amendment						
<p>*If the entry in column 2 is less than the entry in column 4, write "0" in column 5.</p> <p>**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.</p> <p>***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.</p>						
<input type="checkbox"/> The following other fees are incurred by the accompanying papers.						
<input type="checkbox"/> Other: _____						
<p>Please charge Deposit Account No. 01-0519 in the name of Amgen Inc. in the amount of \$930.00. A duplicate copy of this petition is attached.</p>						
<input checked="" type="checkbox"/> If an additional extension of time is required, please consider this a petition therefore.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required by the accompanying papers, or credit any overpayment to Deposit Account No. 01-0519.						
<p><u>Please Send Future Correspondence To:</u> U.S. Patent Operations/KMP M/S 10-1-B AMGEN INC. Amgen Center 1840 De Havilland Drive Thousand Oaks, California 91320-1789</p>				<p><i>Karol M. Pessin</i> Karol M. Pessin Attorney/Agent for Applicant(s) Registration No.: 34,899 Phone: (805) 447-2193 Date: August 27, 1997</p>		

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F. C. Craft
Printed Name

F. C. Craft
Signature

